

CLAIMS ONLY							Application Number 10787101		Filing Date			
							Applicant(s)					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51		/			
2							52		/			
3							53		/			
4							54		/			
5							55		/			
6							56		/			
7							57		/			
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17							67		/			
18							68		/			
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22							72					
23							73					
24							74					
25							75					
26	/						76					
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42		/					92					
43		/					93					
44		/					94					
45		/					95					
46		/					96					
47		/					97					
48		/					98					
49		/					99					
50		/					100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					